

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

**STATEMENT OF ECONOMIC INTERESTS**  
FAIR POLITICAL PRACTICES COMMISSION  
**COVER PAGE**

**RECEIVED**  
Date Received  
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**MAR 09 2012**  
SISKIYOU COUNTY  
CLERK'S OFFICE

Please type or print in ink.

NAME OF FILER

(LAST)

(FIRST)

(MIDDLE)

Cook

James

Clark

12 MAR 19 AM 9:09

**1. Office, Agency, or Court**

Agency Name

Siskiyou County Board of Supervisors

Division, Board, Department, District, if applicable

Your Position

Board member

Board

**RECEIVED**  
in the office of the Secretary of State  
of the State of California

► If filing for multiple positions, list below or on an attachment.

MAR 14 2012

Agency:

see attached

Position:

**DEBRA BOWEN**  
Secretary of State

**2. Jurisdiction of Office (Check at least one box)**

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☒ County of Siskiyou

☐ City of

☐ Other

**3. Type of Statement (Check at least one box)**

☒ Annual: The period covered is January 1, 2011, through December 31, 2011.

-or-

The period covered is \_\_\_\_\_, through December 31, 2011.

☐ Assuming Office: Date assumed \_\_\_\_\_

☐ Leaving Office: Date Left \_\_\_\_\_  
(Check one)

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ The period covered is \_\_\_\_\_, through the date of leaving office.

☒ Candidate: Election Year 12

Office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: \_\_\_\_\_

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule B - Real Property - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this  
I certify under penalty of perjury under the laws of the State of California that

Date Signed

9 March 2012  
(month, day, year)

Signature

- Air Pollution Control Dist.  
Director
- Superior California Economic  
Development Council  
Director
- NoRTEC  
Governing Board

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>JAMES C CODE</u>

<b>1. BUSINESS ENTITY OR TRUST</b>	
Name <u>Community Development on Call</u>	
Address (Business Address Acceptable) <u>POB 458, Montague, CA</u>	
Check one <input type="checkbox"/> Trust, go to 2 <input checked="" type="checkbox"/> Business Entity, complete the box, then go to 2	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Grant Consulting</u>	
FAIR MARKET VALUE <input checked="" type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: <u>1/11</u> <u>1/11</u> ACQUIRED    DISPOSED
NATURE OF INVESTMENT <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Other	
YOUR BUSINESS POSITION <u>Owner</u>	

<b>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</b>	
<input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000

<b>3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE</b> (Attach a separate sheet if necessary.)
--

<b>4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST</b>
---

Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY	
--	--

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	
---	--

Description of Business Activity or City or Other Precise Location of Real Property	
--	--

FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: <u>1/11</u> <u>1/11</u> ACQUIRED    DISPOSED
--	--

NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
---	--

<input type="checkbox"/> Leasehold <input type="checkbox"/> Other Yrs. remaining	
---	--

<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	
--	--

Comments: \_\_\_\_\_

<b>1. BUSINESS ENTITY OR TRUST</b>	
Name	
Address (Business Address Acceptable)	
Check one <input type="checkbox"/> Trust, go to 2 <input type="checkbox"/> Business Entity, complete the box, then go to 2	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
FAIR MARKET VALUE <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: <u>1/11</u> <u>1/11</u> ACQUIRED    DISPOSED
NATURE OF INVESTMENT <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Other	
YOUR BUSINESS POSITION	

<b>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</b>	
<input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000

<b>3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE</b> (Attach a separate sheet if necessary.)
--

<b>4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST</b>
---

Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY	
--	--

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	
---	--

Description of Business Activity or City or Other Precise Location of Real Property	
--	--

FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: <u>1/11</u> <u>1/11</u> ACQUIRED    DISPOSED
--	--

NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership	
---	--

<input type="checkbox"/> Leasehold <input type="checkbox"/> Other Yrs. remaining	
---	--

<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	
--	--

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

James Cook

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

4308 - 0400

CITY

Montague

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

11 / 11 / 11  
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold ☐ Other  
Yrs. remaining

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

43800 580

CITY

Montague

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

11 / 11 / 11  
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold ☐ Other  
Yrs. remaining

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments:

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>James C Cook</u>

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Siskiyou County  
ADDRESS (Business Address Acceptable)  
POB 750 Yreka  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Supervisor  
YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary      ☐ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Yreka Physical Therapy  
ADDRESS (Business Address Acceptable)  
215 Executive Ct. Yreka  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Physical Therapy  
YOUR BUSINESS POSITION  
transcriptionist

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary      ☐ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_ %      ☐ None

SECURITY FOR LOAN

☐ None      ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address

City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>James Cook</u>

- You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

<p>► NAME OF SOURCE <u>KCRC</u></p> <p>ADDRESS (Business Address Acceptable) <u>1215 K Street #165D</u></p> <p>CITY AND STATE <u>Sacramento CA</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): <u>1/1/12 - 12/31/12</u> AMT: \$ <u>89<sup>00</sup></u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input checked="" type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input type="checkbox"/> Other - Provide Description <u>Travel</u> <u>Board of Directors</u></p>	<p>► NAME OF SOURCE <u>WORTREC</u></p> <p>ADDRESS (Business Address Acceptable) <u>Chico, CA</u></p> <p>CITY AND STATE</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): <u>1/1/12 - 12/31/12</u> AMT: \$ <u>600<sup>00</sup></u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input type="checkbox"/> Other - Provide Description <u>Travel</u> <u>Board of Governors</u></p>
<p>► NAME OF SOURCE <u>Superior CA E.D. Council</u></p> <p>ADDRESS (Business Address Acceptable) <u>Redding CA</u></p> <p>CITY AND STATE</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): <u>1/1/12 - 12/31/12</u> AMT: \$ <u>20<sup>00</sup></u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input checked="" type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input type="checkbox"/> Other - Provide Description <u>Travel</u> <u>Board of Directors</u></p>	<p>► NAME OF SOURCE</p> <p>ADDRESS (Business Address Acceptable)</p> <p>CITY AND STATE</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): <u>      </u> AMT: \$ <u>      </u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input type="checkbox"/> Other - Provide Description</p>

Comments: \_\_\_\_\_